

<b>STATEMENT OF ORGANIZATION</b>		<b>OFFICE USE ONLY</b>									
<b>1. Name and Address of Committee</b>  CRESCENT RIVER PORT PILOTS' ASSN. LOCAL PAC 8712 Highway 23 Belle Chasse, LA 70037  Check If: New Committee _____	<b>2. Date of this Statement</b>  <div style="text-align: center;">1/6/2006</div> <b>3. Estimated Membership</b>  <div style="text-align: center;">50</div> <b>4. Amended Statement?</b>  <div style="text-align: center;"> <input type="checkbox"/> Yes     <input checked="" type="checkbox"/> No </div>	<b>Report Number:</b> 9043  <b>Date Filed:</b> 1/6/2006									
<b>5. All Committee Officers and Directors (including Chairperson, Treasurer, if any, and any other committee officers and directors)</b> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 33%;"><u>a. Name</u></th> <th style="text-align: left; width: 33%;"><u>b. Position</u></th> <th style="text-align: left; width: 34%;"><u>c. Address</u></th> </tr> </thead> <tbody> <tr> <td>E. MICHAEL BOPP</td> <td>Chairperson</td> <td>8712 Highway 23  Belle Chasse, LA 70037</td> </tr> <tr> <td>A.J. GIBBS</td> <td>Treasurer</td> <td>8712 Highway 23  Belle Chasse, LA 70037</td> </tr> </tbody> </table>			<u>a. Name</u>	<u>b. Position</u>	<u>c. Address</u>	E. MICHAEL BOPP	Chairperson	8712 Highway 23  Belle Chasse, LA 70037	A.J. GIBBS	Treasurer	8712 Highway 23  Belle Chasse, LA 70037
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<b>6. Affiliated Organizations</b> <small>(Any organization other than a political committee which directly or indirectly established, administers, or financially supports this committee.)</small> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 33%;"><u>a. Name</u></th> <th style="text-align: left; width: 33%;"><u>b. Address</u></th> <th style="text-align: left; width: 34%;"><u>c. Relationship to Committee</u></th> </tr> </thead> <tbody> <tr> <td colspan="3" style="height: 40px;"> </td> </tr> </tbody> </table>			<u>a. Name</u>	<u>b. Address</u>	<u>c. Relationship to Committee</u>						
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<b>7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.)</b>  <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 33%;"><u>a. Name</u></th> <th style="text-align: left; width: 33%;"><u>b. Address</u></th> </tr> </thead> <tbody> <tr> <td colspan="2" style="height: 40px;">On attached sheet</td> </tr> </tbody> </table>			<u>a. Name</u>	<u>b. Address</u>	On attached sheet						
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<b>8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE:</b> a. Check one: <input type="checkbox"/> Principal Campaign Committee <input type="checkbox"/> Subsidiary Committee											
<b>b. Name of Candidate</b>  <div style="height: 60px;"> </div>	<b>c. Office Sought by the Candidate</b>  <div style="height: 60px;"> </div>										
<b>9. a. Name of Person Preparing Report</b> ARWIN P BASCLE  <b>b. Daytime Telephone</b> 504-866-8863											
<b>10. WE HEREBY CERTIFY</b> that the information contained in this STATEMENT OF ORGANIZATION is true and correct to the best of our knowledge, information and belief.  This <u>6th</u> day of <u>January</u> , <u>2006</u> .  <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top; padding: 10px;"> <u>E. Michael Bopp</u>  Signature of Committee/Chairperson </td> <td style="width: 50%; vertical-align: top; padding: 10px;"> <u>504-392-5016</u>  Daytime Telephone </td> </tr> <tr> <td style="vertical-align: top; padding: 10px;"> <u>A. J. Gibbs</u>  Signature of Committee Treasurer, if any </td> <td style="vertical-align: top; padding: 10px;"> <u>504-392-5016</u>  Daytime Telephone </td> </tr> </table>			<u>E. Michael Bopp</u> Signature of Committee/Chairperson	<u>504-392-5016</u> Daytime Telephone	<u>A. J. Gibbs</u> Signature of Committee Treasurer, if any	<u>504-392-5016</u> Daytime Telephone					
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7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.)

a. Name

REGIONS BANK

b. Address

Post Office Box 30280  
New Orleans, LA 70190